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FIRST NAMED INVENTOR

John Shanklin

PUBLICATION FEE DUE

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FILING DATE

04/12/2004

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PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.

BROOKHAVEN SCIENCE ASSOCIATES/ BROOKHAVEN NATIONAL LABORATORY BLDG. 475D - P.O. BOX 5000 UPTON, NY 11973

10/12/2007

TITLE OF INVENTION: MUTANT FATTY ACID DESATURASE AND METHODS FOR DIRECTED MUTAGENESIS

ISSUE FEE DUE

\$720

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APPLICATION NO.

APPLN. TYPE

10/822 370

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nonprovisional CLASS-SUBCLASS EXAMINER ART UNIT · SAIDHA, TEKCHAND 1652 536-023200 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, | Lori-Anne Neiger ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Tee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 5.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE Brookhaven Science Associates, LLC Upton, New York 11973, USA Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 💆 Corporation or other private group entity 🚨 Government 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) 4a. The following fee(s) are submitted: 🛭 Issue Fee A check is enclosed. Dublication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 02_3977 (enclose an extra copy of this form). Advance Order - # of Copies _ 5. Change in Entity Status (from status indicated above) □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attermey or agent; or the assignce or other party in interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature Date Lori-Anne Neiger Registration No._ 44,949 Typed or printed name _ This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO or process) an application. Confidentially is governed by 37 U.S.C. 1/2, and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including galberrup, requiring, and establishing the completed application from the backs, and the confidential that the c

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